

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>2881</u>	2. Fiscal Year Covered From: <u>1 / 1 / 2004</u> Through: <u>12 / 31 / 2004</u>
3. Name and address of person filing. Name <u>Jason P Mendenhall</u> P.O. Box, Bldg., Room No., if any Street <u>32206 East 164th Street</u> City <u>Pleasant Hill</u> State <u>Missouri</u> ZIP Code + 4 <u>64080</u>	4. Name, file number, and address of labor organization. Name <u>Laborers' Local Union No. 663</u> Labor Organization File Number <u>042-741</u> P.O. Box, Building and Room Number, if any Street <u>7820 Prospect</u> City <u>Kansas City</u> State <u>Missouri</u> ZIP Code + 4 <u>64132</u>
5. Position in labor organization. <u>Recording Secretary</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.

### Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>[Signature]</u>	On <u>07/05/05</u> Date	<u>816-444-0062</u> Telephone Number

Name of Person Filing	File Number U- <b>2881</b>
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <b>Arnold, Newbold, Winter, &amp; Jackson PC</b></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>1125 Grand Blvd, Suite 1600</b></p> <p>City <b>Kansas City</b></p> <p>State <b>Missouri</b> ZIP Code + 4 <b>64106-2503</b></p>	<p>9. Business deals with:</p> <p>a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <b>Construction Industry Laborers' Fringe Benefit Fund</b></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>116 Commerce Drive</b></p> <p>City <b>Jefferson City</b></p> <p>State <b>Missouri</b> ZIP Code + 4 <b>65109-1196</b></p>	<p>11.a. Nature of such dealing.</p> <p><b>Fund Council</b></p> <p>11.b. Approximate dollar value of such dealing.</p> <p>12.a. Nature of interest held or income received.</p> <p><b>\$50.00 gift certificate at Christmas</b></p> <p>12.b. Amount. <b>\$50.00</b></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment.</p>

Name of Person Filing	File Number U- <b>2881</b>
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>9. Business deals with:</p> <p>a. Labor Organization</p> <p>b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p>11.b. Approximate dollar value of such dealing.</p> <p>12.a. Nature of interest held or income received.</p> <p>12.b. Amount.</p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <b>Blue Cross Blue Shield</b></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>2301 S. Main</b></p> <p>City <b>Kansas City</b></p> <p>State <b>Missouri</b> ZIP Code + 4 <b>64108</b></p>	<p>14.a. Nature of payment.</p> <p><b>Entry into annual Golf Tournament at Deer Creek Golf Course</b></p> <p><b>Round of Golf and Lunch</b></p> <p><b>Golf - \$70.00</b></p> <p><b>Lunch - \$30.00</b></p>
<p>13.b. Is the Business an Employer <input checked="" type="checkbox"/> or Consultant <input type="checkbox"/></p>	<p>14.b. Amount of payment. <b>\$100.00</b></p>

Name of Person Filing	File Number U- 2881
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <b>Invesco</b></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>1360 Peachtree Street</b></p> <p>City <b>Atlanta</b></p> <p>State <b>Georgia</b> ZIP Code + 4 <b>30309</b></p>	<p>9. Business deals with:</p> <p>a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <b>Construction Industry Pension Fund</b></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>116 Commerce Dr.</b></p> <p>City <b>Jefferson City</b></p> <p>State <b>Missouri</b> ZIP Code + 4 <b>65209-1196</b></p>	<p>11.a. Nature of such dealing.</p> <p><b>Investment manager with \$130 million in pension investments</b></p> <p>11.b. Approximate dollar value of such dealing.</p> <p>12.a. Nature of interest held or income received.</p> <p><b>Can of toffee at christmas</b></p>
	<p>12.b. Amount. <b>34.00</b></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment.</p>

Name of Person Filing	File Number U- 2887
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name AON Consulting</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any P.O. Box 13647</p> <p>Street 1000 Walnut</p> <p>City Kansas City</p> <p>State Missouri ZIP Code + 4 64199</p>	<p>9. Business deals with:</p> <p>a. Labor Organization</p> <p>X b. Trust</p> <p>c. Employer</p>								
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name Construction Industry Welfare Fund</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 116 Commerce Drive</p> <p>City Jefferson City</p> <p>State Missouri ZIP Code + 4 65109-1196</p>	<p>11.a. Nature of such dealing.</p> <p>Consultant for the welfare fund in Jefferson City.</p> <p>11.b. Approximate dollar value of such dealing.</p> <p>12.a. Nature of interest held or income received.</p> <p>3 dinners held prior to welfare meetings in Jefferson City, Missouri;</p> <table><tr><td>April</td><td>30.00</td><td>October</td><td>30.00</td></tr><tr><td>June</td><td>30.00</td><td></td><td></td></tr></table> <p>12.b. Amount. 90.00</p>	April	30.00	October	30.00	June	30.00		
April	30.00	October	30.00						
June	30.00								

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment.</p>

Name of Person Filing	File Number U- <u>288/</u>
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>Arnold, Newbold, Winter &amp; Jackson P.C.</u></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <u>1125 Grand Boulevard suite 1600</u></p> <p>City <u>Kansas City</u></p> <p>State <u>Missouri</u> ZIP Code + 4 <u>64106-2503</u></p>	<p>9. Business deals with:</p> <p>a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u>Construction Industry Laborers Fringe Benefit Fund</u></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <u>116 Commerce Drive</u></p> <p>City <u>Jefferson City</u></p> <p>State <u>Missouri</u> ZIP Code + 4 <u>65109-1196</u></p>	<p>11.a. Nature of such dealing.</p> <p><u>Fund Counsel</u></p>
	<p>11.b. Approximate dollar value of such dealing.</p>
	<p>12.a. Nature of interest held or income received.</p> <p><u>Christmas Party at Harrad's</u>  <u>hotel &amp; Casino</u>  <u>Dinner 10.00</u>  <u>Drinks 15.00</u></p>
	<p>12.b. Amount. <u>25.00</u></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment.</p>